Clerk of the House of Representatives
Legislative Resource Center
B-106 Cannon Building
Washington, DC 20515

Cscretary of the Senate
Office of Public Records
232 Hart Building
Washington, DC 20510



LOBBYING REGISTRATION

Lobbying Disclosure Act of 1995 (Section 4)

Check if this is an Amended Registration 1. Es	ffective Date of Registration DECRUSER 15:1998
2. House Identification Number Senat	te Identification Number
REGISTRANT 3. Registrant name CHERNIKOFF & COMPAN	
Address 1320 18th STREET NW	<i>,</i>
City WASHINGTON	State DC Zip QOLZG
4. Principal place of business (if different from line 3) City SHHE	State/Zip (or Country)
5. Telephone number and contact name (SUR) 223-7252 Contact Ruff	HARERAUES E-mail (optional)
6. General description of registrant's business or activities LABBUING FIRM	
CLIENT A Lobbying firm is required to file a separate registration for each	client. Organizations employing in-hours lobbyists should check the box
1. Client name THESON 1045 MONK TN5711	UIE of JAZZ
Address 5225 WISCONSIN AVENUE NU	
City WASHINGTON	 A training the control of the property of the control of the control
8. Principal place of business (if different from line 7) City SBIHE	State/Zip (or Country)
9. General description of client's business or activities (TAZZ of MUSICAL TERK HING & PERFOR	
LOBBYISTS 10. Name of each individual who has acted or is expected to act as a I this section has served as a "covered executive branch official" acting as a lobbyist for the client, state the executive and/or legisly	or "covered legislative branch official" within two years of first
· Name	Covered Official Position (if applicable)
HARRY CHERNIKOFF	
8 Constitution of the second	
Form LD-1 (Rev. 06/98)	Page I

 General lobbying issue are 	S cas. Select all applic	able codes listed in inst	ructions and on t	he reverse side of Form LI)-1, page 1.
ART			·····		
12. Specific lobbying issues (current and anticipat	:d)			
NATIONAL CAPITI	AL ARTS + C	ULTURAL A	THAIRS PRO	OBRAH	
				, 5, 4	
FFILIATED ORGA Is there an entity other the a semiannual period and	han the client that c	ontributes more than or part plans, superv	\$10,000 to the ises or controls	lobbying activities of the	e registrant i g activities?
No ⇒ Go to line	14			his section for each entit en proceed to line 14.	y matching
Name		Address		Principal Place of Business (city and state or country)	
			Į.	•	
OREIGN ENTITIE	S				
4. Is there any foreign enti-	ty that:				
a) holds at least 2	20% equitable own	rship in the client or	any organizatio	on identified on line 13;	or
		in major part, plans, mization identified o		trols, directs, finances o	r subsidizes
c) is an affiliate of	of the client or any	organization identifis	d on line 13 an	d has a direct interest in	the outcome
of the lobbying	g activity?	·			
	e the registration.	- · y · - 🔾 Yes		rest of this section for e	
☑ No ⇒ Sign and date			•	criteria above, then sign	and date the
No ⇒ Sign and date			registration.		
No ⇒ Sign and date	Address	Pris	cipal place of		
· · · · · · · · · · · · · · · · · · ·	Address			contribution for	Ownership percentage in client
· · · · · · · · · · · · · · · · · · ·	Address		cipal place of business	contribution for	percentage
· · · · · · · · · · · · · · · · · · ·	Address		cipal place of business	contribution for	percentage
· · · · · · · · · · · · · · · · · · ·	Address		cipal place of business	contribution for	percentage

Form LD-1 (Rev. 06/98)